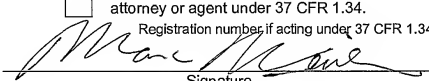


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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | Docket Number (Optional) 2059-0103P |
| Application Number 09/890,425-Conf. #1812 | Filed February 19, 2002 |
| For A PHARMACEUTICAL COMPOSITION OF COMPLEX CARBOHYDRATES AND ESSENTIAL OILS AND METHODS OF USING THE SAME | |
| Art Unit 1651 | Examiner T. E. Underdahl |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | |
| | <div style="display: flex; justify-content: space-around;"> <u>Fee</u> <u>Small Entity Fee</u> </div> |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 \$65 \$ _____ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$490 \$245 \$ 245.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1110 \$555 \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1730 \$865 \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2350 \$1175 \$ _____ |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-2448</u> . | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | |
| I am the <input type="checkbox"/> applicant/inventor. | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. | |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>32,181</u> | |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. | |
| Registration number if acting under 37 CFR 1.34 _____ | |
| <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Signature </div> <div style="text-align: center;"> <u>July 27, 2009</u> Date </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="text-align: center;"> <u>Marc S. Weiner</u> Typed or printed name </div> <div style="text-align: center;"> <u>(703) 205-8000</u> Telephone Number </div> </div> | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | |
| <input type="checkbox"/> Total of <u>1</u> forms submitted. | |